Notice of Dissolution

JAN 2 3 2003

Reset Form

Duera Vista	
FORM	(Rev. 07/02)
DR-3	,
NOTICE OF	
DISSOLUTION	
For Office Use Only Comm. # 17 08 9 Indexed Audited Computer Cortified Date of Dissolution	
Certified Date of Dissolution	

COMMITTEE NAME

	Official Name of Committee	
2242 630th Str	eet	
	Street	
Newell, Iowa 5	0568	
	City, State, Zip Code	
	(712) 272-4690	
	Area Telephone Code	

WHEN TO FILE:

The Notice of Dissolution must be filed within thirty (30) days of completion of all the following:

- 1. All debts, loans and obligations have been paid or transferred;
- 2. All campaign funds have been spent;
- 3. All campaign property sold or transferred (candidates only); and
- 4. A final report disclosing all transactions closing the committee.

For state candidates and state PACs, a final bank statement must be filed with the Notice of Dissolution or as soon as possible if the bank statement is not available at the time the Notice of Dissolution is filed.

Signature of Candidate or Treasurer (if candidate's committee)/Signature of Chair or Treasurer (if PAC)

Date Signed

FOR INSTRUCTIONS, SEE BACK OF FORM

This form is not applicable to statutory political committees.

			Klas Vista		
FOR INSTRUCTIONS, SEE BACK OF FORM DISCLOSURE SUMMARY PAG	E Reset P	om	DR-2 DISCLOSURE		
COMMITTEE NAME (Must be same as on Statement of Organization) Overgaard for B.V. County Recorder			Rev. 01/2003) REPORT		
IMPORTANT: Indicate type of committee you are reporting for:		c	omm. # 17089		
(1)Statewide/Legislative Candidate (2)Statewide PAC (3)State Party (5)County PAC (6)Ballot Issue/Franchise Committee (7)County/City C (8)Support State of Candidates		A	udited		
CANDIDATE COMMITTEES ONLY:		<u>`</u>	On pater		
Candidate Name	Political Party				
Debora K. Overgaard	Republican	TA.	and the same process		
Office Sought	District (if Senate or House	, 0	SOLO SOLO DO		
B.V. County Recorder		- 11	· · · · · · · · · · · · · · · · · · ·		
		7	JAN 2 3 2003		
SIGNATURE OF TREASURER (or person filing this report)	TELEPHONE	FILE	DATE SIGNED		
Late filed reports are subject to	o possible civil and cr	iminal p	enalties.		
SEE INSTRUCTIONS ON BACK AND COMPLETE THE	FOLLOWING SENTEN	CE:			
I AM FILING A	REPORT FOR ANA (1) EL	ECTION /	(2)NON-ELECTION YEAR.		
(report date)	Indicate one				
CHECK IF AMENDMENT TO REPORT DATED October 18	, 2002	Local Con	nmittees, enter Date of Election		
(You must continue to file proofs until a Notice of Dissolution is filed.)		which Ele	ounty & Local Committees, enter County in hich Election is held Buena Vista		
STATEMENT	OF CASH ON HAND				
CASH ON HAND at the beginning of the reporting period. (This by the committee. This amount MUST be the same as of the last reporting period, or must be zero if this is fin	s the cash on hand at the en	d	199.95		
ADD TOTAL MONEY TAKEN IN THIS PERIOD					
Schedule A: Cash Contributions total (Attach Schedul	e A) (*also see in-kind below	<i>(</i>)	2,275.00		
Schedule F: Loans Received total (Attach Schedule F	·)		0.00		
Schedule H: Total Sales of Campaign Property (Attac	h Schedule H)		0.00		
(Schedule H applies to Candidates' Comm	ittees Only)				
	SUB-TO	TAL\$	2,474.95		
SUBTRACT TOTAL MONEY SPENT THIS PERIOD					
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans b	elow)	1,059.24		
Schedule F: Loan Repayments total (Attach Schedule	F)		0.00		
CASH ON HAND at the end of this reporting period (if final repo	ort, balance must		1,415.71		
be zero) (Attach DR-3)		\$	1911-2-11		
**UNPAID BILLS (From Schedule D - Attach Schedule D)		\$			
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Sched					
**OUTSTANDING LOANS (From Schedule F - Attach Schedule	•				
CANDIDATE COMMITTEES ONLY:		•			
CONSULTANT BREAKDOWN (Schedule G Attached?)			YES NO		

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

For Instructions, See Back of Form

CONTRIBUTIONS - MONEY TAKEN IN

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SCHEDULE	
A (Rev. 06/97)	MONETARY RECEIPTS
CHE	CK THIS BOY IS

AMENDING FORM

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

Overgaard for B.V. County Recorder

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
	ID#	Unitemized Contributions during peroid			
	CK#			\$ 1,315.00	
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<u></u>			SUB-TOTAL		<u> </u>

TOTAL (if last page of this schedule)

\$ 1,315.00

2,275.00

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1 (for Schedule A)